

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
HealthSouth Corporation Political Action Committee

ADDRESS (number and street) 3660 Grandview Parkway, Suite 200
Check if different than previously reported. (ACC) Birmingham AL 35243

2. **FEC IDENTIFICATION NUMBER** C00414649
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 06 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Edmund M. Fay

Signature of Treasurer Electronically Filed by Edmund M. Fay Date 07 20 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
HealthSouth Corporation Political Action Committee

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		15752.89
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	8107.75									
(c) Total Receipts (from Line 19)	13050.96	60842.06								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	21158.71	76594.95								
7. Total Disbursements (from Line 31)	6512.50	61948.74								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14646.21	14646.21								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
HealthSouth Corporation Political Action Committee

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10328.20	40223.56
(ii) Unitemized	2722.76	16118.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	13050.96	56342.06
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	13050.96	56342.06
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	4500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	13050.96	60842.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13050.96	60842.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	12.50	1948.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	12.50	1948.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	60000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6512.50	61948.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6512.50	61948.74

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	13050.96	56342.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13050.96	56342.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12.50	1948.74
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12.50	1948.74

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
James A. Allen

Mailing Address 436 Golf Drive

City Hoover State AL Zip Code 35226

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation VP Operations Support

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 434.00

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9820
 Amount of Each Receipt this Period 124.00
 Payroll Deduction (\$31, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Thomas Almerico

Mailing Address 10154 S Bannor Hill Road

City Sandy State UT Zip Code 84092

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9896
 Amount of Each Receipt this Period 60.00
 Payroll Deduction (\$15, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Donna C. Anderson

Mailing Address 120 29th Court SW

City Vero Beach State FL Zip Code 32968

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Director of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9963
 Amount of Each Receipt this Period 30.00
 Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 214.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 26
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial) Christine Bachrach		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	4		2	0	0	9													
Mailing Address 3725 Dunbarton Drive		Transaction ID: SA11AI.9823																				
City State Zip Code Mountain Brook AL 35223	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>100.00</td></tr> </table>		100.00																			
100.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"> <tr><td>C</td></tr> </table>	C	Payroll Deduction (\$25, 2 weeks)																				
C																						
Name of Employer HealthSouth Corporation Occupation SVP Compliance	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>1850.00</td></tr> </table>		1850.00																			
1850.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

B.

Full Name (Last, First, Middle Initial) Russell A. Bailey		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	4		2	0	0	9													
Mailing Address 58 Edgemire Place		Transaction ID: SA11AI.9824																				
City State Zip Code The Woodlands TX 77381	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>400.00</td></tr> </table>		400.00																			
400.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"> <tr><td>C</td></tr> </table>	C	Payroll Deduction (\$100, 2 weeks)																				
C																						
Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>1400.00</td></tr> </table>		1400.00																			
1400.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

C.

Full Name (Last, First, Middle Initial) David Berry		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	4		2	0	0	9													
Mailing Address 175 Central Street		Transaction ID: SA11AI.9827																				
City State Zip Code North Reading MA 01864	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>80.00</td></tr> </table>		80.00																			
80.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"> <tr><td>C</td></tr> </table>	C	Payroll Deduction (\$20, 2 weeks)																				
C																						
Name of Employer HealthSouth Corporation Occupation Regional Director of Managed Care	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>280.00</td></tr> </table>		280.00																			
280.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%; text-align: center;"> <tr><td>580.00</td></tr> </table>	580.00
580.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey P. Blackwood
Mailing Address 276 Stonebridge Road
City Birmingham State AL Zip Code 35210
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Director of Design & Construction
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 266.00
Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9828
Amount of Each Receipt this Period 76.00
Payroll Deduction (\$19, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Terrance Brown
Mailing Address 5217 Meadow Garden Lane
City Birmingham State AL Zip Code 35242
FEC ID number of contributing federal political committee. **C**
Name of Employer Healthsouth Occupation Healthcare Facility Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 06 / 11 / 2009
Transaction ID: SA11AI.9969
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Barbara L. Butler
Mailing Address 2444 Oak Bend Place
City Newburgh State IN Zip Code 47630
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 06 / 11 / 2009
Transaction ID: SA11AI.9970
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 776.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 9 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Barbara L. Butler

Mailing Address 2444 Oak Bend Place

City State Zip Code
Newburgh IN 47630

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9832

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$10, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Charles Richard Byrd, III

Mailing Address 3609 Ridgecrest Road

City State Zip Code
Birmingham AL 35223

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation VP Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9833

Amount of Each Receipt this Period 96.00

Payroll Deduction (\$24, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Randall Carpenter

Mailing Address 3754 Carisbrooke Drive

City State Zip Code
Hoover AL 35226

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9834

Amount of Each Receipt this Period 160.00

Payroll Deduction (\$40, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 296.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 / 26
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Dr. Dexanne B. Clohan

Mailing Address 2351 River Grand Drive

City Birmingham State AL Zip Code 35243

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Chief Medical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2688.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9835

Amount of Each Receipt this Period 768.00

Payroll Deduction (\$192, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
Kevin R. Conn

Mailing Address 10456 N.W. 48th Manor

City Coral Springs State FL Zip Code 33076

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Vice President - Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9836

Amount of Each Receipt this Period 80.00

Payroll Deduction (\$20, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Kristen DeHart

Mailing Address 1542 Canterbury Lane

City Liberty State MO Zip Code 64068

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9839

Amount of Each Receipt this Period 80.00

Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 928.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Catherine V. Devaney

Mailing Address 19 Buckingham Drive

City Bow State NH Zip Code 03304

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9840

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$15, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Elaine Ebaugh

Mailing Address 4331 38th Way S.

City St. Petersburg State FL Zip Code 33711

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9900

Amount of Each Receipt this Period 80.00

Payroll Deduction (\$20, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Laurie English

Mailing Address 904 Emerald Boulevard

City Southlake State TX Zip Code 76902

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation SVP Inpatient Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9843

Amount of Each Receipt this Period 300.00

Payroll deduction (\$75, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ▶ 440.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Daniel A. Eppley
 Mailing Address 5236 Manorwood Drive
 City State Zip Code
 Sarasota FL 34235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Healthsouth Corporation Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00
 Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9902
 Amount of Each Receipt this Period 80.00
 Payroll Deduction (\$20, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Edmund M. Fay
 Mailing Address 527 Valley Road
 City State Zip Code
 Birmingham AL 35206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation SVP Treasury
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00
 Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9844
 Amount of Each Receipt this Period 280.00
 Payroll Deduction (\$70, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Barbara V. Feth
 Mailing Address 1930 East Claire Drive
 City State Zip Code
 Phoenix AZ 85022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Therapy Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00
 Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9845
 Amount of Each Receipt this Period 80.00
 Payroll Deduction (\$20, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 440.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 26
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Robert Christopher Fox

Mailing Address 412 East Peck Boulevard

City State Zip Code
Lafayette LA 70508

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.9972

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Brenda Gosney

Mailing Address 968 Nagel Road

City State Zip Code
Butler KY 41006

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9904

Amount of Each Receipt this Period
80.00

Payroll Deduction (\$20, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Jerry Gray

Mailing Address 7130 East Saddleback Street Apt. 56

City State Zip Code
Mesa AZ 85207

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation SVP Inpatient Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2784.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.9848

Amount of Each Receipt this Period
224.00

Payroll Deduction (\$56, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► **804.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) William House		Date of Receipt
	Mailing Address 1739 Lake Cyrus Club Drive		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Hoover	AL	35244
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9851
Name of Employer HealthSouth		Occupation Regional Controller	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="378.00"/>	<input type="text" value="108.00"/>
			Payroll Deduction (\$27, 2 weeks)

B.	Full Name (Last, First, Middle Initial) Justin Hunter		Date of Receipt
	Mailing Address 5221 42nd Street NW		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9852
Name of Employer HealthSouth		Occupation VP Government and Regulatory Affairs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2060.00"/>	<input type="text" value="160.00"/>
			Payroll Deduction (\$40, 2 weeks)

C.	Full Name (Last, First, Middle Initial) W. Anthony Jackson		Date of Receipt
	Mailing Address 939 Laurel Meadow Lane		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fort Mill	SC	29708
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9853
Name of Employer HealthSouth Corporation		Occupation Healthcare Facility Administrator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	<input type="text" value="60.00"/>
			Payroll Deduction (\$15, 2 weeks)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="328.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Robert F. Jernigan</p> <p>Mailing Address 1220 Greensward Drive</p> <p>City State Zip Code Tallahassee FL 32312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt 06 / 24 / 2009</p> <p>Transaction ID: SA11AI.9905</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Payroll Deduction (\$25, 2 weeks)</p>
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<p>B. Full Name (Last, First, Middle Initial) Sylvia Kelly</p> <p>Mailing Address 51 Paa-Ko Drive</p> <p>City State Zip Code Sandia Park NM 87047</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt 06 / 24 / 2009</p> <p>Transaction ID: SA11AI.9907</p> <p>Amount of Each Receipt this Period 60.00</p> <p>Payroll Deduction (\$15, 2 weeks)</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>C. Full Name (Last, First, Middle Initial) David Klementz</p> <p>Mailing Address 808 Parkview Circle</p> <p>City State Zip Code Birmingham AL 35242</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Occupation CFO - Inpatient Division</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 812.00</p>	<p>Date of Receipt 06 / 24 / 2009</p> <p>Transaction ID: SA11AI.9857</p> <p>Amount of Each Receipt this Period 232.00</p> <p>Payroll Deduction (\$58, 2 weeks)</p>
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SUBTOTAL of Receipts This Page (optional)	392.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Thomas Langley		Date of Receipt MM / DD / YYYY 06 / 24 / 2009		
	Mailing Address 1203 Elm Drive		Transaction ID: SA11AI.9859		
	City Alabaster	State AL	Zip Code 35007	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction (\$50, 2 weeks)		
	Name of Employer Healthsouth	Occupation Vice President		Aggregate Year-to-Date 700.00	

B.	Full Name (Last, First, Middle Initial) Robert Leech		Date of Receipt MM / DD / YYYY 06 / 24 / 2009		
	Mailing Address 8945 Evening Grove Cr		Transaction ID: SA11AI.9861		
	City Cordova	State TN	Zip Code 38018	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction (\$20, 2 weeks)		
	Name of Employer HealthSoth	Occupation VP, Home Health Operations		Aggregate Year-to-Date 280.00	

C.	Full Name (Last, First, Middle Initial) Phillip E. Loggins		Date of Receipt MM / DD / YYYY 06 / 24 / 2009		
	Mailing Address 5022 McLaughlin Drive		Transaction ID: SA11AI.9909		
	City Tallahassee	State FL	Zip Code 32309	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction (\$15, 2 weeks)		
	Name of Employer HealthSouth Corporation	Occupation Director of Risk		Aggregate Year-to-Date 210.00	

SUBTOTAL of Receipts This Page (optional)	340.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 26
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial) Terry R Maxhimer		Date of Receipt MM / DD / YYYY 06 / 24 / 2009
Mailing Address 4817 Wood Springs Ln		Transaction ID: SA11AI.9863
City Birmingham	State AL	Zip Code 35226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer HealthSouth	Occupation SVP Inpatient Operations	Payroll Deduction (\$75, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

B.

Full Name (Last, First, Middle Initial) Jack Mitchell		Date of Receipt MM / DD / YYYY 06 / 11 / 2009
Mailing Address 1822 East Manchester Drive		Transaction ID: SA11AI.9974
City Fayetteville	State AR	Zip Code 72703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HealthSouth Corporation	Occupation Hospital Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Wanda Morales		Date of Receipt MM / DD / YYYY 06 / 24 / 2009
Mailing Address 309 Chapelwood Drive		Transaction ID: SA11AI.9865
City Dothan	State AL	Zip Code 36303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer HealthSouth	Occupation Director of Quality	Payroll Deduction (\$20, 2 weeks)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	630.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ed Mowen		Date of Receipt MM / DD / YYYY 06 / 24 / 2009
	Mailing Address 8613 Highlands Drive		Transaction ID: SA11AI.9866
	City Trussville	State AL	Zip Code 35173
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
	Name of Employer HealthSouth	Occupation Regional Controller	Payroll Deduction (\$15, 2 weeks)

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00
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B.	Full Name (Last, First, Middle Initial) Sandra Murvin		Date of Receipt MM / DD / YYYY 06 / 24 / 2009
	Mailing Address 1831 28th Ave South Suite 330		Transaction ID: SA11AI.9867
	City Birmingham	State AL	Zip Code 35209
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer HealthSouth	Occupation Vice President	Payroll Deduction (\$40, 2 weeks)

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00
---------------------------------------------------------------------------------------------------------------------------------	------------------------------------

C.	Full Name (Last, First, Middle Initial) Martin O'Neil		Date of Receipt MM / DD / YYYY 06 / 24 / 2009
	Mailing Address 11853 104th Lane North		Transaction ID: SA11AI.9911
	City Largo	State FL	Zip Code 33773
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Healthsouth Corporation	Occupation Director of Marketing	Payroll Deduction (\$25, 2 weeks)

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00
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SUBTOTAL of Receipts This Page (optional)	310.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 26
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Patricia Ostaszewski</p> <p>Mailing Address 54 Bay Way Drive</p> <p>City State Zip Code Brick NJ 08723</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Occupation VP Operations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: SA11AI.9868</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Payroll Deduction (\$25, 2 weeks)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	9												

<p>B. Full Name (Last, First, Middle Initial) Shawn Patzkowsky</p> <p>Mailing Address 133 Narrows Peak Circle</p> <p>City State Zip Code Birmingham AL 35242</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Occupation Director of Income Tax Compliance</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 280.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: SA11AI.9869</p> <p>Amount of Each Receipt this Period 80.00</p> <p>Payroll Deduction (\$20, 2 weeks)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	9												

<p>C. Full Name (Last, First, Middle Initial) Gary Payne</p> <p>Mailing Address 2401 N Slick Rock</p> <p>City State Zip Code Columbia MO 65202</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HealthSouth Corporation Occupation Healthcare Facility Administrator</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 280.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: SA11AI.9870</p> <p>Amount of Each Receipt this Period 80.00</p> <p>Payroll Deduction (\$20, 2 weeks)</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	9												

SUBTOTAL of Receipts This Page (optional)	260.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 26
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mark J Rice

Mailing Address 182 Jill Loop

City Ruston State LA Zip Code 71270

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9873

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$15, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
James H Rogers

Mailing Address 84 Downing Street

City Columbia State SC Zip Code 29209

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Occupation Healthcare Facility Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 452.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9874

Amount of Each Receipt this Period 152.00

Payroll Deduction (\$30, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Robert J. Rosene

Mailing Address 16654 West Moreland Street

City Goodyear State AZ Zip Code 85338

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Corporation Occupation Regional Director Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9959

Amount of Each Receipt this Period 40.00

Payroll Deduction (\$10, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 252.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Ruskan
 Mailing Address 304 Beechwood Drive
 City Richmond State VA Zip Code 23229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00
 Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9875
 Amount of Each Receipt this Period 70.00
 Payroll Deduction (\$20, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Linda Anne Savino
 Mailing Address 13 Telegraph Hill Rd
 City Holmdel State NJ Zip Code 07733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt 06 / 11 / 2009
Transaction ID: SA11AI.9976
 Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Jim Simpson
 Mailing Address 4285 Lexie Circle
 City Trussville State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Healthsouth Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 532.00
 Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9876
 Amount of Each Receipt this Period 152.00
 Payroll Deduction (\$38, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ▶ 472.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michele M Skripps
 Mailing Address 204 Lyttleton Way
 City Anderson State SC Zip Code 29621
 Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9877
 Amount of Each Receipt this Period 80.00
 Payroll deduction (\$20, 2 weeks)
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation Healthcare Facility Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 280.00

B. Full Name (Last, First, Middle Initial)
Thomas E. Slimick
 Mailing Address 3460 Indian Lake Lane
 City Pelham State AL Zip Code 35124
 Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9878
 Amount of Each Receipt this Period 60.00
 Payroll Deduction (\$15, 2 weeks)
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Corporation Occupation Director of Investigations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 210.00

C. Full Name (Last, First, Middle Initial)
Mark J Tarr
 Mailing Address 1039 Williams Trace
 City Birmingham State AL Zip Code 35242
 Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9882
 Amount of Each Receipt this Period 460.00
 Payroll Deduction (\$115, 2 weeks)
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HealthSouth Occupation President - Inpatient Division
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 1610.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael G. Treadway

Mailing Address 109 West Hoskins Street

City State Zip Code
New Boston TX 75570

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HealthSouth Corporation Healthcare Facility Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9919

Amount of Each Receipt this Period 60.00

Payroll Deduction (\$15, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Sandra Kaye Vollman

Mailing Address 2908 Glenstone Circle

City State Zip Code
Birmingham AL 35242

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HealthSouth Senior VP Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9883

Amount of Each Receipt this Period 160.00

Payroll Deduction (\$40, 2 weeks)

C. Full Name (Last, First, Middle Initial)
John Whittington

Mailing Address 2716 Watkins Glen Drive

City State Zip Code
Birmingham AL 35216

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HealthSouth General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1960.52

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9886

Amount of Each Receipt this Period 710.52

Payroll Deduction (\$177.6-3, 2 weeks)

SUBTOTAL of Receipts This Page (optional) 930.52

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Linda Masone Wilder

Mailing Address 2335 Ridge Trail

City Birmingham State AL Zip Code 35242

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Occupation Senior VP Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 532.00

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9887
Amount of Each Receipt this Period 152.00
Payroll Deduction (38, 2 weeks)

B. Full Name (Last, First, Middle Initial)
Arthur E Wilson, Jr.

Mailing Address 5947 South Shades Crest Rd

City Bessemer State AL Zip Code 35022

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Occupation Senior VP Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1076.88

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9889
Amount of Each Receipt this Period 307.68
Payroll Deduction (\$76.92, 2 weeks)

C. Full Name (Last, First, Middle Initial)
Chris Winchester

Mailing Address 384 Greystone Glen Circle

City Birmingham State AL Zip Code 35242

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Occupation Director of Compensation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.9890
Amount of Each Receipt this Period 100.00
Payroll Deduction (\$25, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 559.68

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 26
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Robert M Wisner

Mailing Address 1020 Eagle Lake Circle

City Birmingham State AL Zip Code 35242

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9891

Amount of Each Receipt this Period 100.00

Payroll Deduction (\$25, 2 weeks)

B.

Full Name (Last, First, Middle Initial)
John Workman

Mailing Address 7054 North Highfield Dr

City Birmingham State AL Zip Code 35242

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9894

Amount of Each Receipt this Period 600.00

Payroll Deduction (\$150, 2 weeks)

C.

Full Name (Last, First, Middle Initial)
Russell Yeager

Mailing Address 628 Springbank Terrace

City Birmingham State AL Zip Code 35242

FEC ID number of contributing federal political committee. **C**

Name of Employer HealthSouth Occupation VP Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt 06 / 24 / 2009

Transaction ID: SA11AI.9895

Amount of Each Receipt this Period 76.00

Payroll Deduction (\$19, 2 weeks)

SUBTOTAL of Receipts This Page (optional) ► 776.00

TOTAL This Period (last page this line number only) ► 10328.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HealthSouth Corporation Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) FRANK KRATOVIL FOR CONGRESS</p> <p>Mailing Address 222 Main Sail Drive PO Box 518</p> <p>City State Zip Code Stevensville MD 21666</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name FRANK M MR. JR KRATOVIL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9983</p> <p>Date of Disbursement 06 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) GRIFFITH FOR CONGRESS</p> <p>Mailing Address PO BOX 2916</p> <p>City State Zip Code Huntsville AL 35804</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name PARKER DR. GRIFFITH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AL District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9984</p> <p>Date of Disbursement 06 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC</p> <p>Mailing Address 175 SOUTH WEST TEMPLE SUITE 650</p> <p>City State Zip Code SALT LAKE CITY UT 84101</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name ORRIN G HATCH</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: UT District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.9978</p> <p>Date of Disbursement 06 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)	6500.00
TOTAL This Period (last page this line number only)	6500.00